

Tennessee

Arthritis Self-Help Course Expanded to Underserved Communities

Producing Results

The Arthritis Self-Help Course has improved quality of life among people with arthritis, and more widespread use of the course can save money and reduce the burden of arthritis. In 2004, Tennessee successfully expanded availability and participation in this self-help course to underserved areas that previously had no participation.

Public Health Problem

Arthritis is among the most common health problem in the United States. During 2002, physician-diagnosed arthritis affected about 1 in 5 U.S. adults (21 percent). In Tennessee, approximately 29.5 percent of the adult population reported physician-diagnosed arthritis in 2002, exceeding the national estimate. Inadequate access to health information is a major barrier to arthritis intervention and treatment in Tennessee.

Research has shown that the pain and disability associated with arthritis can be minimized through early diagnosis and treatment, including appropriate self-management. The Arthritis Self-Help Course, developed at Stanford University, teaches patients necessary self-management skills. This course, taught in a group setting, has been shown to reduce arthritis pain by 20 percent and physician visits by 40 percent, even four years later.

Taking Action

With CDC support, Tennessee has partnered with the University of Tennessee's Agriculture Extension Services (UTAES) to expand the availability of the Arthritis Self-Help Course in 25 rural areas where access to health care is severely limited. Forty UTAES educators in the 25 targeted regions have been trained to be instructors for this self-help course. Additionally, discretionary funds were used to provide financial support and incentives to participants. Before this partnership, 377 metropolitan participants completed the Arthritis Self-Help Course, and no residents of the 25 identified underserved areas had taken the course. In 2004, 642 participants completed the course. Of those participants, 449 completed the Arthritis Self-Help Course in metropolitan areas and 193 attended courses offered by the UTAES educators.

Implications and Impact

The Arthritis Self-Help Course had been proven to improve quality of life among people with arthritis. Nationally, less than 1 percent of people with arthritis who could benefit from self-management programs, used them; more widespread use of this course would save money and reduce the burden of arthritis. This partnership demonstrates the importance of identifying and implementing strategies to increase the use of this course in rural, underserved communities. Such collaboration, aimed at implementing community-based projects responsive to the needs and culture of the community, can serve as a model for reaching underserved populations in other states as well.

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